

# **Washington State Developmental Disabilities Council**

## **Five Year State Plan**

For year 2013

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## Section I : Council Identification

PART A: State Plan Period: **October 1, 2011 through September 30, 2016**

PART B: Contact Person: **Eva Rooks, Planning and Communications Manager**

Phone Number: **(360) 586-3559**

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PART C: Council Establishment:

(i) Date of Establishment: **1976-Apr-29**

(ii) Authorization: **Executive Order**

(iii) Authorization Citation: **Executive Order 96-06**

PART D: Council Membership [Section 125(b)(1)-(6)].

(i) Council Membership rotation plan:

Public member positions are for three-year terms with an option to request reappointment for an additional three years. Each year the Council conducts interviews for vacant positions and then provides names of selected individual(s) (and two alternatives) for each vacancy. The Governor reviews the candidates and either makes an appointment based on the recommendation of the interview team or selects an individual of the Governor's own choosing.

Agency/organizational representatives serve as long as they remain the designee for their agency or organization.

(ii) Council Members:

#	Name	Code	Organization	Appointed	Term Date	Alt/Proxy State Rep Name
1	Aguirre, Andres	A1	Divison of Vocational Rehabilitation	1996-Nov-20		Don Kay
2	Lindeblad, MaryAnne	A3	Aging and Disability Services Administration	1996-Nov-20		Patty McDonald
3	Porter, Doug	A4	Health and Recovery Services Administration	1996-Nov-20		Mark Westenhaver
4	Rolfe, Linda	A4	WA Division of Developmental Disabilities	1996-Nov-20		Janet Adams
5	Stroh, Mark	A5	Disability Rights Washington	1996-Nov-20		David Lord & Betty Schwieterman
6	Guralnick, Mike	A6	UCEDD, University of Washington	1996-Nov-20		Sherrie Brown
7	Selecky, Mary	A8	WA State Department of Health	1996-Nov-20		Carol Miller
8	Smith, Leslie	A9	Council Chair	2012-May-21		
9	Gill, Douglas	A9	Office of the Superintendent of Public Instruction	1996-Nov-20		John Bresko
10	Adams, George	B1		2007-Oct-23	2013-Jun-30	
11	Patayon, Adrian	B1		2012-Jul-27	2015-Jun-30	
12	Renner, Jessica	B1		2012-Jul-27	2015-Jun-30	
13	Self, Jason	B1		2011-Oct-26	2014-Jun-30	
14	Lemus, John	B1	N/A	2005-Aug-08	2011-Jun-30	
15	Morrow, Aaron	B1	N/A	2011-Oct-26	2014-Jun-30	
16	Neumann, Amber	B1	N/A	2007-Oct-23	2013-Jun-30	
17	Payne, Teresa	B1	N/A	2008-Sep-25	2014-Jun-30	
18	Cutler, Joshua	B2		2012-Jul-27	2015-Jun-30	
19	Nemhauser, Rachel	B2		2012-Mar-09	2014-Jun-30	
20	Searles, Suzanne	B2		2012-Jul-12	2015-Jun-30	
21	Anderson, Brenda	B2	N/A	2007-Oct-23	2013-Jun-30	
22	Black, Helen	B2	N/A	2011-Oct-26	2015-Jun-30	
23	Finnegan, Leo	B2	N/A	2005-Aug-08	2011-Jun-30	
24	Fuerstenau, Mona	B2	N/A	2009-Jul-10	2015-Jun-30	
25	Gollehon, Erin	B2	N/A	2008-Sep-25	2014-Jun-30	
26	Lerma, Maria	B2	N/A	2010-Oct-21	2013-Jun-30	
27	Pendergrass, LaquitaJoy	B2	N/A	2007-Oct-23	2013-Jun-30	
28	Rusing, Laurene	B2	N/A	2009-Jul-10	2015-Jun-30	
29	Franklin, Mia	C2		2011-Oct-26	2015-Jun-30	

PART E: Council Staff [Section 125(c)(8)(B)].

#	Name	Position or Working Title	FT/PT %
1	Blazian, Jennifer	Contracts Manager	100.00%
2	Dahl, Brian	Council Support Coordinator	100.00%
3	Diemert, Crystal	Office Manager	100.00%
4	Holen, Ed	Executive Director	100.00%
5	Maltman, David	Public Policy	100.00%
6	Patrick, Donna	Public Policy Director	100.00%
7	Rasmussen, Phillip	Receptionist	100.00%
8	Rooks, Eva	Planning & Communications Manager	100.00%
9	Vacant	Budget & Fiscal Director	100.00%
10	West, Linda	Membership Coordinator	100.00%

## Section II : Designated State Agency

PART A: The designated state agency is:

**Department of Commerce**

**PO Box 42525 / 1011 Plum Street SE**

**Olympia, WA 98504**

**phone: (360) 725-2910, fax:**

**email: dan.mcconnon@commerce.wa.gov**

PART B: Direct Services. [Section 125(d)(2)(A)-(B)].

**N/A or No direct services are provided.**

PART C: Memorandum of Understanding/Agreement: [Section 125(d)(3)(G)].

**The DSA has a Memorandum of Understanding/Agreement with the Council.**

PART D: DSA Roles and Responsibilities related to Council. [Section 125(d)(3)(A)-(G)]

**The Department of Commerce was selected by the Governor's office as the Council's DSA on August 3, 2011. We are in the process of developing our Memorandum of Understanding with the Department of Commerce.**

PART E: Calendar Year DSA was Designated. [Section 125(d)(2)(B)]

**2011**

## **Section III : Comprehensive Review and Analysis [Section 124(c)(3)]**

**INTRODUCTION:** A broad overview of the Comprehensive Review and Analysis conducted by the Council.

### **Economic Overview**

Washington State is experiencing challenging times. During the course of the Council's previous state plan, funding for services moved from steady (but modest) increases to cuts at a level never seen before. Anticipating the future availability of services, supports and other assistance that will be available to families and the unmet need is difficult because of the continued revenue shortfalls in Washington State. While funding for services has been cut, individuals' and families' need for services continue and will most likely increase.

### **Planning in Challenging Times**

Washington State began planning and preparation for its 2012 State Plan in September 2009. Multiple events were conducted to give Council members and staff a better understanding of the current unmet needs of families and individuals and the trends that would impact people with developmental disabilities and their families in the future. Council events and planning sessions focused on gathering public input and understanding relevant data and research.

### **Public Input Received**

To hear from individuals and families across the state, the Council held Town Hall meetings in conjunction with Council meetings during 2008, 2009 and 2010. In directed roundtable discussion, Council members and staff were able to hear about what was working (within the DD system and generic systems serving people with developmental disabilities), what needed to improve and ideas for change in each of the communities where meetings were held.

In November 2009, the Council convened a day-long meeting called the "Bottle Cap Symposium" to look at the future. Council members and other interested stakeholder participants attended this event. Speakers from state and other agencies shared information about future trends regarding Washington State's demographics, availability of DD and other services, workforce issues, education, employment, and housing. Participants then spent time in small groups postulating how these anticipated changes could affect people with developmental disabilities and how the DD community could be better prepared to be effective in the future. During early 2010, the Council requested public input on the State Plan priorities. Over 400 surveys were received.

### **Data and Research**

In early 2010, Council staff developed a "State of the State" report which provided draft data on the services, supports, and other assistance available to individuals with developmental disabilities and their families, as well as the unmet need. This report was provided to Council members to review in preparation for developing the state plan goals, objectives and strategies.

PART A: State Information

(i) Racial and Ethnic Diversity of the State Population:

Race/Ethnicity	Percentage of Population
White alone	80%
Black or African American alone	3.3%
American Indian and Alaska Native alone	1.3%
Asian alone	6.7%
Native Hawaiian and Other Pacific Islander alone	0.4%
Hispanic or Latino of any race	10.3%
Some other race alone	3.8%
Two or more races:	4.3%

(ii) Poverty Rate: **11.3%**

(iii) State Disability Characteristics:

a) Prevalence of Developmental Disabilities in the State: **110955**

**This figure was calculated by multiplying the state's 2010 population (6,724,540) by the DD Act estimate of the occurrence of Developmental Disabilities (1.65%).**

b) Residential Settings:

Year	Total Served	A. Number Served in Setting of 6 or less (per 100,000)	B. Number Served in Setting of 7 or more (per 100,000)	C. Number Served in Family Setting (per 100,000)	D. Number Served in Home of Their Own (per 100,000)
2009	108	88.700	18.900	209.500	56.000
2007	110	87.800	21.800	212.200	56.300
2005	115	90.500	24.000	206.700	59.200

c) Demographic Information about People with Disabilities:

People in the State with a Disability	Percentage
Population 5 to 17 years	4.9%
Population 18 to 64 years	10.4%
Population 65 years and over	38%

Race and Hispanic or Latino Origin of People with a Disability	Percentage
White alone	12.7%
Black or African American alone	13.8%
American Indian and Alaska Native alone	16.5%
Asian alone	7.4%
Native Hawaiian and Other Pacific Islander alone	9.9%
Some other race alone	7%
Two or more races	11.1%
White alone, not Hispanic or Latino	13.1%
Hispanic or Latino (of any race)	7.3%

Employment Status Population Age 16 and Over	Percentage with a Disability	Percentage without a Disability
Employed	25.3%	66.2%

Not in Labor Force	69.6%	27.3%
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Education Attainment Population Age 25 and Over	Percentage with a Disability	Percentage without a Disability
Less than High School graduate	18.8%	8.6%
High School graduate, GED, or alternative	30.9%	22.6%
Some college or associate's degree	34.5%	34.5%
Bachelor's degree or higher	15.7%	34.3%

Earnings in the past 12 months Population Age 16 and Over with Earnings	Percentage with a Disability	Percentage without a Disability
\$ 1 to \$4,999 or less	29.8%	19.3%
\$ 5,000 to \$ 14,999	9.8%	7.6%
\$ 15,000 to \$ 24,999	14.6%	14.3%
\$ 25,000 to \$ 34,999	12.6%	12.6%

Poverty Status Population Age 16 and Over	Percentage with a Disability	Percentage without a Disability
Below 100 percent of the poverty level	20.5%	9.7%
100 to 149 percent of the poverty level	11.3%	6.6%
At or above 150 percent of the poverty level	68.2%	83.7%

## **PART B: Portrait of the State Services [Section 124(c)(3)(A and B)]:**

### **(i) Health/Healthcare:**

Adult individuals with disabilities in Washington State are just as likely as people without disabilities to have health insurance coverage. However, they are more likely to be insured by Medicaid (27.5%) or Medicare (21.4%) than those without disabilities (1.0% and 3.29%). In Washington State, there are approximately 38,000 DD eligible individuals getting medical services through Medicaid (medical care provided to individual with DDD designation).

So while medical coverage is theoretically available, quality, coverage limitations and access to health care providers are an issue that is commonly cited anecdotally. However, these concerns are not borne out by data reviewed by the Council and others (Core Indicators Review Panels), which indicate that health care is available.

Washington's current fiscal situation does not bode well for those enrolled on state-covered programs. The State Legislature and agencies scour for any and all services that are not federally-mandated in hopes of reducing expenditures.

Persons with disabilities in Washington state are 50% more likely to be obese (35.8%) than people without disabilities (22.3%), making adequate health care and monitoring even more important.

### **(ii) Employment:**

#### **Employment Service Funding and Provision**

Washington State's DD agency (DDD) contracts to local counties who then contract with employment providers throughout the state. Counties may, but don't always, add additional funding toward employment.

#### **Numbers Served, Earnings and Types of Employment Support**

In FY 2009, DDD funded county contracted employment and day program services for an average of 10,130 persons per month. The average monthly cost per adult client was \$454. For the 5,809 DDD employment

clients earning a wage in 2009, the average annual earning was \$7,030. Approximately 61% of the individuals who receive day and employment support were working in integrated employment for at least part of the workweek. Washington is among the top five states based on the percent of individuals in integrated employment. The average annual wage of DDD clients receiving supported employment increased from \$6,253 in FY 2004 to \$7,003 in FY 2008.

Currently (2010) employment programs funded by DDD include: supported individual employment (3,759 served), group supported employment (1,113 served), pre-vocational (680 served), person-to-person (2,325 served), and community access (357). There is some confusion about what constitutes day programs separately as opposed to employment services.

#### High School Transition

About 700 students with DD graduate from high school each year who may become DVR clients. In the past, the State Legislature and Governor have responded to the need for long term support on the job for people with DD by making increased appropriations for Supported Employment services through DDD.

#### Division of Vocational Rehabilitation Services

At the present time, the Division of Vocational Rehabilitation (DVR) in the Department of Social and Health Services does not have a waiting list for services and they have been able to serve all applicants who were determined eligible for their program. Approximately 22.0% of all DVR clients have been individuals with developmental disabilities that included intellectual disabilities, cerebral palsy, and autism. The number of people being served, however, is decreasing. In WA State FY 2006 DVR served an average of 22,869 clients in a month, by WA State FY that number had decreased to 12,869.

Approximately 2,610 individuals with intellectual or other developmental disabilities move through various stages of the rehabilitation process in a single year. Included in this number are about 1,200 who are new applicants. Among the new applicants, nearly 800 are in the process to become employed and the others have been employed for 90 days or longer. Of course, there are DVR clients with DD each year who have their cases closed because they decline DVR services or they are not successful in their rehabilitation.

#### (iii) Informal and informal services and supports:

##### Home and Community Based Waivers

At the start of the last state plan, DDD had begun implementation of four new HCBS waivers. In 2009, a fifth waiver, the Children's Intensive In-Home Behavioral Support Waiver (CIIBS), was approved, effective May 1, 2009. Washington's five waivers are: Basic, Basic Plus, Core, Community Protection, and CIIBS.

Basic Waiver clients live with their family or in their homes and do not need out-of-home residential services. In FY 2009, 2,948 clients were served on average each month at an average monthly cost of \$1,796 per client.

Basic Plus Waiver clients live with family or in another setting with assistance. They need a higher level of services than those on the Basic Waiver. In FY 2009, 2,139 clients were served on average each month at an average monthly cost of \$2,016 per client.

Community Protection Waiver clients require 24-hour, on-site supervision for the safety of others and require therapies and/or other services. In FY 2009, 452 clients were served on average each month at an average monthly cost of \$10,032 per client.

Core Waiver Clients require habilitation services or live at home, but are at immediate risk of out-of-home placement. In FY 2009, 3,996 clients were served on average each month at an average monthly cost \$6,448 per client.



CIIBS : Children in the program are at high risk of out-of-home placement due to challenging behaviors. Participants are 8-20 years of age. In October 2009, 16 clients were enrolled in the program at an average cost \$2,849 per client.

#### Residential Services

For FY 2009, the state provided community residential services to an average of 4,600 clients a month. Residential services include: RHCs, Community Protection Program, Community residential, supported living, Community ICF/MR, SOLAs, group homes, companion homes & child foster/group care.

#### Residential Services Data

As of July 2009, 978 clients were served in one of the state's five Residential Habilitation Centers (RHC). In FY 2008, the average monthly cost was \$15,208 per client .

The Community Protection Program provides services to clients who require 24-hour on-site staff supervision to ensure the safety of others and require therapies and/or other habilitation services. In FY 2009, 452 clients were served on average each month at an average monthly cost of \$10,032 per client.

In FY 2008, DDD provided community ICF/MR services to an average of 58 clients per month at an average monthly cost of \$6,527 per client.

State Operated Living Alternatives (SOLAs) offer supported living services provided by state employees. In FY 2008, a monthly average of 107 clients were served in SOLAs at an average monthly cost of \$9,973 per client.

In Washington, group homes are residences serving 2 or more adult clients, licensed as a boarding or adult family home. In FY 2008, DDD provided services to in group home settings to an average of 315 clients per month at an average monthly cost of \$4,710 per client.

Supported Living Services offer instruction and support to persons who live in their own homes. In FY 2008, DDD provided supported living services to an average of 3,354 clients per month at an average monthly cost of \$5,537 per client.

Alternative living services is a DDD service of 40 hours or less per month focusing on community-based training that enables a client to live as independently as possible. In FY 2008, DDD provided alternative living services to an average of 299 clients per month at an average monthly cost of \$461 per client.

The Voluntary Placement Program (VPP) offers supports to eligible children living in a licensed setting outside the family home. Placement is solely due to the child's disability. 179 children are in VPP. No children are being added and children age out each year.

Companion homes served an average of 44 clients per month at an average cost of \$4,413 per month per client.

#### (iv) Interagency Initiatives:

A large part of the development of interagency initiatives is derived from interagency task forces and committees. These efforts may include state agencies, councils and coalitions. In order to address comprehensive issues and State policy that impact people with disabilities, the DDC formed the State Disabilities Policy Coalition that includes the protection and advocacy agency (Disability Rights – WA or DRW), the Governor's Committee on Disability Issues and Employment, the State Independent Living Council, and the State Rehabilitation Council. A recent Aging and Disability Resource grant is intended to expand AAA Resource Centers to provide information for people with disabilities. A member of the DDC staff

serves on the Aging and Disability Resource Center planning task force.

Interagency initiatives and planning committees are decreasing in frequency as state budget reductions have limited funding. In addition, a large number of advisory committees have been decommissioned by the Governor in an effort to reduce costs.

#### (v) Quality Assurance:

##### ICF/DD Monitoring

There are fifteen ICF/DD facilities in Washington State -six are operated by the State and nine are small privately operated facilities. To fulfill the DD Act requirement to monitor the health of residents of these facilities, the DDC formed a committee comprised of Council staff and members as well as a representative of DRW to regularly review ICF/DD Statements of Deficiencies and Plans of Correction. With particular focus on issues of "Immediate Jeopardy," the committee reads the reports and identifies any systemic issues that are identified as TAG prefixes in each report. Should a compliance issue be found at multiple facilities, the committee requests additional information on the plan of correction and monitors the State's action to correct the deficiency.

##### Abuse and Neglect

One identified concern has been the reporting of abuse and neglect, specifically how complaints are handled once they are received by the Division. In 2008, the DDC and DRW participated with a group of stakeholders to discuss the State's response for vulnerable adults who experience abuse in adult family homes, nursing homes, boarding homes, institutions and the community and the group made legislative and policy recommendations, which the Legislature acted on.

##### People with Developmental Disabilities in the Justice System

Partially in response to an incident where a man with developmental disabilities suffered probable irreparable harm while incarcerated in a county jail, the Washington State Legislature passed a bill requiring a task force be convened to identify individuals with developmental disabilities in jails and in correctional facilities. A task force convened by the Washington Association of Sheriffs and Police Chiefs and the DDC produced a screening tool, a model policy for the use of the tool, and training in providing good custody for this group.

##### Guardianship

Families and agencies often pursue guardianship when other options for decision making apply. In an attempt to minimize the need for full guardianship to make decisions about medical treatment, the DDC worked with DRW and the UCEDD to research model statutes that create alternatives to surrogate decision making. This collaboration produced a policy briefing paper making recommendations for changes in law and providing a comparison of state statutes on surrogate decision making.

##### Self Directed Services & Satisfaction with DDD Services

In 2010, the DDC completed a process to educate stakeholders and create a plan for a more self directed system of services and supports for people with developmental disabilities. The resulting policy paper outlined steps to follow in implementing a more self directed system.

##### National Core Indicators Review Panels

Through the span of the previous state plan the Council has convened consumer panels to review Washington State's results on the National Core Indicators Surveys. The panel makes recommendations for change to DDD and DDC. DDD and the DDC have acted on a number of these recommendations.

##### Roads to Community Living

The DDC continues to conduct quality assurance interviews of all those with developmental disabilities moving from the state operated DD institutions under the Roads to Community Living Project (Money Follows

the Person).

(vi) Education/Early Intervention:

Early Intervention

Children with developmental disabilities and other children with delays birth to age three are eligible for the Infant and Toddler Early Intervention Program (ITEIP). Through ITEIP, children and their families receive a variety of individualized services, depending upon the needs of the child. Typical services range from physical, occupational, and speech therapy to family training and counseling.

Services to children in ITEIP are funded through public education, county human services agencies, and the Department of Health. In addition, Medicaid funds as well as military and private health care coverage are utilized to pay for these services. Federal funds from the Individuals with Disabilities Education Act, Part C, provide the infrastructure to meet administrative requirements of the Act and about 90% of the Part C funds are used for direct services.

Nearly 10,000 children ages 0 – 3 are served by ITEIP each year. Although ITEIP has experienced growth in enrollments for the last five years, the percentage of all infants and toddlers living in the State enrolled in ITEIP (1.83%) is lower than the national average (2.5%). The suggested reason for the difference may be due to the fact that Washington residents on average have higher incomes and more health care coverage compared to people in other states.

Early intervention reduces future education costs. Washington State data shows 31% of children exiting ITEIP by their third birthday are not eligible for special education. Beginning in 2009, all Washington school districts were required to partner in the delivery of local early intervention services.

To better coordinate the inclusion of children enrolled in ITEIP with children in other programs of early learning including Head Start, the legislature transferred the administration of ITEIP from the Department of Social and Health Services to the Department of Early Learning in 2010.

Education – K-12

In Washington, IDEA Part B students compose approximately 10% of the student population. School data shows that 84.3% of Washington students enrolled in special education spend 40% or more of their time in regular classrooms. Washington ranks 23rd in the country in regard to the percentage of students in special education who graduate with a diploma. School districts are monitored for compliance with federal IDEA laws by the Office of the Superintendent of Public Instruction Compliance Review Team.

Recent educational outcomes released from Washington State's Office of the Superintendent of Public Instruction shows that students with intellectual disabilities are still leaving school for uncertain futures. Post-school data shows that 45% of students with intellectual disabilities are not engaged in activity (employment or training) after leaving high school.

Washington State's Education Reform

On February 1, 2011, Governor Gregoire submitted a proposal to unify the state's eight education agencies and 14 education plans into a Department of Education. The Governor's goal's was one unified vision for education from early learning to graduate school. This reform was not enacted.

(vii) Housing:

In Washington state, individuals with developmental disabilities served by the Division of Developmental Disabilities live with their families (65%); in their own home or apartment (20%); in a group care setting

(13%); or hospitals, jails, mental health hospitals, or are homeless (2%).

#### Rental Unit Availability

The recent economic downturn has decreased rental unit availability in Washington state. This exacerbates an already difficult situation, forcing up rent costs and further limiting the number of available units.

#### Housing Trust Fund DD Set-Aside

The State Housing Trust Fund DD Set-Aside provides funding to develop affordable accessible housing for low-income individuals with developmental disabilities. DDD and the Department of Commerce work collaboratively to identify areas for new projects to ensure that housing is built in places where clients support needs can also be met. The set-aside for DD housing decreased from \$5 million to \$3 million (per biennium) in 2009 due to cuts to the Housing Trust Fund and has remained at the lowered (\$3 million) amount.

#### Homeownership

During the 2006-2011 State Plan, the Council supported two homeownership projects through direct funding and contracted with the Arc of Spokane to provide technical assistance to both projects. As a result of these Council efforts, 50 persons with developmental disabilities became homeowners.

#### (viii) Transportation:

#### (ix) Child Care:

Families having children with developmental disabilities often have difficulty finding high quality child care. This problem is compounded for low-income families for whom it can be a real struggle to find affordable, quality child care for any child. The median annual cost of child care for an infant ranges from \$7,280 to \$9,620. About 175,000 children are enrolled in licensed care with an estimated 35,000 or more caregivers. Washington State licenses or certifies childcare in child care centers (including most school-age programs) and family child care homes.

There are some types of child care that do not require a license in Washington such as Part Day Preschools, Nanny Care (care in the child's home), and school-age programs run by a public schools. Many parents choose to put their children in the care of family, friends, or neighbors who are not licensed caregivers.

Ensuring that child care agencies and programs are connected with ITEIP and special education services is critically important because, for some children, a child care setting might be the first opportunity for a childhood disability to be identified.

The inability or unwillingness of many child care providers to accept children with disabilities often is related to transportation and other logistical problems, difficulties with coordinating early intervention and child care services, and the scarcity of appropriately trained caregivers. A Maine survey of child care providers found that only about one-third of providers served children with medical, physical, or behavioral needs and 12 percent of the providers reported that they had not enrolled a child because of the child's behavioral needs.

#### (x) Recreation:

Recreation has not been a focus in Washington at a statewide level. Anecdotal information gathered at Town

Hall meetings across the state show that there are some community efforts to make recreational activities more inclusive for people with developmental disabilities. While recreational activities are important for people with developmental disabilities because of the increased opportunity for physical activity and community inclusion they provide, this was not selected as a target area by the public in the State Plan survey or by the Council.

**PART C: Analysis of State Issues and Challenges [Section 124(c)(3)(C)]:**

**(i) Criteria for eligibility for services:**

To be eligible for services the person must meet the criteria in state law. Namely, the person must have a disability present before the age of 18, that and is expected to last through the person's lifetime. Besides IQ, other conditions that may be considered for eligibility include: developmental or cognitive disability, developmental delay (birth to 6), cerebral palsy, epilepsy, autism or other neurological conditions that would require treatment similar to that required for individuals with developmental disabilities. The prevalence factor for determining the number of persons who may be eligible for DDD services in Washington State is 1.2%.

In order to receive services, a client must meet the criteria above, must request DDD services, receive an assessment, functionally (and sometimes financially) eligible and agree to receive services from the Division.

**(ii) Analysis of the barriers to full participation of unserved and underserved groups of individuals with developmental disabilities and their families:**

Barriers to full participation include:

**(1) Disparate distribution of funding for ICF/MR versus community services.**

The state DD system (DDD) continues to struggle with downsizing and closing of state run institutions. Washington State's RHCs consume 19% of the agency's residential services budget but residents comprise only 5% of the residential caseload. Repeated attempts to downsize and close institutions have met stiff resistance from state unions and families of those residing in the RHCs. This imbalance results in fewer families receiving services and reductions in service funding. The 2011 Legislature did require closing of one RHC.

**(2) Low levels of fiscal effort by Washington state in funding DD services. Washington ranks 38th in the nation for fiscal effort even though it is ranked 10th in the nation for per capita income.**

**(3) Real and perceived barriers inhibit individuals with developmental disabilities from participating in and benefiting from employment. Families who are not receiving services are unlikely to know about and pro-actively pursue the employment-related transition services to which their child is entitled, increasing the likelihood of unemployment after graduation. Only high school grads who are on waivers are consistently funded by the Legislature for employment support. Others are dependent on inconsistent legislative funding. Additionally, DVR sometimes refuses to open cases for people with developmental disabilities who do not have DDD long-term employment support dollars.**

**(4) Poverty as a barrier to full community participation continues to be a reality for a large number of people with developmental disabilities and their families. Even for families receiving services, poverty remains high. In Washington's Core Indicator Child Family survey, 39% of the families receiving DD services reported household income of \$25,000 or less. In comparison, Washington state's 2009 census data shows only 13% of all families reported income of \$25,000 or less.**

(iii) The availability of assistive technology:

The proliferation of technology and technology applications offers both hope and frustration to people with developmental disabilities. Increasing awareness of the impact of our aging population has increased the interest of agencies serving senior populations in how currently used technology applications (telephones, PCs) can be adapted to enable aging individuals to live independently as long as possible. Products initially focused on seniors could result in applications that can be used “as is” or could be easily adapted to be of benefit to people with developmental disabilities. Previous assistive technology programs geared for PC users cost thousands of dollars, were dependent on a lap top, and sometimes Internet connectivity. Smart phones offer unfettered access to graphic rich applications which are more suited for all users, but especially helpful to those with developmental disabilities.

The downside to technological proliferation is the increasing difficulty of identifying useful applications, which can be overwhelming. Indeed, as of August 2010, iPhone users had access to 250,000 phone apps.

Assistance with locating, understanding and funding for assistive technology is not well-publicized. Washington Assistive Technology Fund (WATF), University of Washington Center for Technology and Disability Studies (UWCTDS) and Easter Seals provide help with htis, but not always support. Individuals with developmental disabilities and their families may not even be aware of these programs.

(iv) Waiting Lists:

a. Numbers on Waiting Lists in the State:

Year	State Pop. (100,000)	Total Served	Number Served per 100,000 state pop.	National Averaged served per 100,000	Total persons waiting for residential services needed in the next year as reported by the State, per 100,000	Total persons waiting for other services as reported by the State, per 100,000
2009	6.700	11591	173.900	212.400	0.000	0.000
2007	6.500	10084	155.900	198.400	0.000	0.000
2005	6.300	10257	163.500	184.000	0.000	0.000

b. Description of the State's wait-list definition, including the definitions for other wait lists in the chart above:

Washington State doesn't keep a “wait list”; it instead keeps what the Division labels as a “database” for individuals determined eligible and needing waiver services. Eligible clients will be pulled in the order they have been determined eligible for services if and when funding is available. The data base details: (1) what waiver (priority) the individual qualified for; (2) the reason why they couldn't be put on the waiver (3) and the date they were put in the database.

As of May 5, 2011, the Division reported 951 people on their waiver database requesting to be on a waiver and 140 people waiting to move from one waiver to another.

Another unserved list is maintained by case managers for the state-funded Individual and Family Support Services Program. The Division reported there were approximately 5,500 individuals waiting for this program in February 2011.



c. To the extent possible, provide information about how the State selects individuals to be on the wait list: Anyone who meets the ICF/MR level of care (determined via the DDD CARE assessment) and requests a waiver is included in the "data base".

d. Entity who collects and maintains wait-list data in the State:

- ☐ Case management authorities
- ☐ Providers
- ☐ Counties
- ☒ State Agencies
- ☐ Other:

e. A state-wide standardized data collection system is in place:

- ☒ Yes/No

f. Individuals on the wait list are receiving (select all that apply):

- ☒ No services
- ☐ Only case management services
- ☐ Inadequate services
- ☐ Comprehensive services but are waiting for preferred options (e.g., persons in nursing facilities, institutions, or large group homes waiting for HCBS)
- ☐ Other: see description below

Other services:

Other services description(s):

g. Individuals on the wait list have gone through an eligibility and needs assessment:

- ☒ Yes/No

Use space below to provide any information or data related to the response above:

Individuals on the waiver "data base" do go through the state's care assessment. Those waiting for other services may or may not have been through a formal assessment.

h. There are structured activities for individuals or families waiting for services to help them understand their options or assistance in planning their use of supports when they become available (e.g. person-centered planning services):

- ☐ Yes/No

i. Specify any other data or information related to wait lists:

In January 2011, 13,600 families who were on case-management only (no paid services) lost their case managers, losing the only ongoing connection they had with the Division of Developmental Disabilities.

Advocates have worked to supplement information about people waiting for services and have projected from DDD provided data that there are 1,197 high school grads waiting for employment services, 10, 217 adults waiting for employment services and 1,875 senior families in need of services.

j. Summary of waiting list Issues and Challenges:

Because the Division is guarded about the number and characteristics of people waiting for services, it is difficult to get an adequate picture of who is waiting to be served. One thing is certain, the number of people needing services or more intensive services is growing. More disturbing is the lack of available community options for children with intensive behavioral needs, which has led to increase in people turning to RHCs for short and long-term care. The RHCs have about 30-40 children in crisis and permanent status at any given time, causing institutional census growth. The need for intensive behavior supports far outstrips the capacity of the new behavior supports waiver to enroll and assist families. Washington is facing more and more families in crisis, particularly around children with autism and behavioral issues. Because families can't get the help they need at home or in their communities, an increasing number of parents feel their only funded option is an RHC.

(v) Analysis of the adequacy of current resources and projected availability of future resources to fund services:

The outlook for adequate resources for now and the future is not promising. 2011 is the third legislative session in a row with budget reductions to services. Legislators have incrementally tweaked not only the number of people receiving services but the level of care (hours) provided to those receiving Medicaid Personal Care. A 10% average reduction in Medicaid Personal Care is impacting 86,000 people who are aging or have disabilities.

In the future, the anticipated needs of an aging DD population and their caregivers will need to be addressed. Nationally, 25% of all people with DD live with family caregivers who are over the age of 60 – that could equate to 13,477 people in Washington State. This graying demographic could result in an influx of demand, as families who have shouldered their children's care alone must ask for help when they are no longer able to care for their adult children. Washington still has 13,600 individuals who have no paid services or are waiting for services. There is also proposed reductions in the rates paid to employment and community residential providers, further stressing the system.

On a positive note, Washington state has just received a grant to help people who are dual eligible (on both Medicare and Medicaid). The State is looking at moving Medicaid Personal Care Services from the Medicaid State Plan Service to a new Community First Choice Option Waiver. This would result in an enhanced federal match and more flexibility in serving people. Currently there are legislative proposals to consolidate Washington's large state institutions and to fund a family to family mentoring effort to ensure families are well-prepared to assist their family member leaving a state-run RHC to a community placement.

(vi) Analysis of the adequacy of health care and other services, supports, and assistance that individuals with developmental disabilities who are in facilities receive:



The Council review the annual ICF reports and the quality assurance reviews of facilities meet federal standards.

(vii) To the extent that information is available, the adequacy of home and community-based waivers services (authorized under section 1915(c) of the Social Security Act (42 U.S.C. 1396n(c))):

Currently there are more people requesting home and community based services than there is funding. More funding is needed, not only to increase the number of individuals served under the waiver, but to meet the expected increase in service needs as those currently on waivers grow older.

For those on waivers, satisfaction appears to be high. A survey of Washington's home and community waiver clients conducted by the Division of Developmental Disabilities and evaluated by the National Core Indicators survey, showed that of those surveyed: 87% get the services they need, 90% like where they live and 95% like their job or day activity.

#### PART D: Rationale for Goal Selection [Section 124(c)(3)(E)]:

The Council determined its focus and funding by:

- I. Reviewing the results of the previous State Plan to determine which activities appeared to have the most systemic impact (Identify what is working well)
- II. Soliciting and reviewing public feedback (Identify what the public identifies as areas of concern) .
- III. Reviewing state system data and public priorities (Identify gaps) to identify focus area.

##### I. Review of Current State Plan Results

In January 2009, the Council reviewed its work (to date) in all areas of emphasis and determined that the highest priorities and work areas for the coming state plan were: leadership, self-advocacy and advocacy. These were identified as the backbone on which any (systems change, capacity building or advocacy) work must be built.

##### II. Public Feedback and State System Review

To prepare for goal selection in other areas, the Council solicited public input received in a number of ways during 2009 and 2010: Town Hall Meetings, a Bottle Cap Symposium (focused on identifying how future trends will impact people with developmental disabilities and their families) , Core Indicator Review Panel Recommendation Reports, and the results of a state plan priority SurveyMonkey survey -which received over 500 responses. The top areas identified in the SurveyMonkey survey were: employment, community supports, quality assurance and housing.

Summaries of the events listed above and the SurveyMonkey were compiled by Council staff as well as a "State of the State" report which provided information about the systems impacting people with developmental disabilities in Washington state for use at planning sessions in July and September 2010.

##### III. Prioritization of Areas of Focus

When prioritizing areas for goal development, Council members made decisions to prioritize by weighing goal areas against the following criteria:

- 1) Would work in the area create systems change or increase capacity?
- 2) Were there unmet needs in that area? (supported by data)
- 3) Did public input identify this area as a high need? and
- 4) Is there something cutting edge in this area that could be done and hasn't been tried?

Based on Council member consensus, areas identified for priority (goal) focus in the 2012-2016 State Plan were quality assurance (advocacy, self-advocacy and leadership, as well as quality assurance activities), housing, employment and community supports. These were the same priorities as were identified by the public in our public survey.

#### PART E: Collaboration [Section 124(c)(3)(D)]

##### (i) As a Network:

The ADD Network partners have identified the Juvenile Justice system (Juvenile Rehabilitation Administration (JRA) as a system that needs investigation.

There is a great deal of anecdotal evidence of a “pipeline” from school to JRA for children with disabilities, but little research. Research is growing about the adult prison system and disabled individuals in it and federal level data exists for children, but more is needed. Through collaboration we will: 1) get more information about children with disabilities (and children with intellectual disabilities specifically) who are incarcerated in the Washington system, 2) understand the process by which they arrived there—i.e., the link to special education services and the court system, 3) develop recommendations on addressing the significant number of children with behavioral disabilities who are being suspended or expelled from public education and 4) the relationship to institutionalization in RHCs or other out of home placements.

The specific activities planned include:

(1) UCEDD will seek project funding to explore the JRA system and gather basic data on numbers of students in the system, process by which they arrived at JRA (through educational and juvenile records). (2) UCEDD will continue to advocate with the School of Law to reestablish a Disability Law Clinic that will initially focus on special education/disciplinary action as well as providing services when identified for incarcerated children. (3) DRW will do a survey of the special education needs of families with children with intellectual disabilities to better identify the main concerns they have and work with the UCEDD to provide additional special education legal advocacy to families with intellectually disabled youth. (4) DDC will co-chair a workgroup (that DRW and UCEDD will also serve on) to “address issues relating to juveniles with developmental disabilities” who are detained in the juvenile justice system

(ii) With each other: (e.g. Describe the plans the Council has to collaborate with the UCEDD(s). Describe the plans the Council has to collaborate with the P&A.)

See above.

(iii) With other entities: (e.g. network collaboration with other entities in the State, including both disability and non-disability organizations, as well as the State agency responsible for developmental disabilities services)

See above.

## Section IV : 5-Year Goals [Section 124(4); Section 125(c)(5) and (c)(7)]

### GOAL # 1: Self-Advocacy

As a result of Council and other entities' efforts, the number of individuals who report (in the National Core Indicators survey) that they have participated in a self-advocacy group, meeting, conference or event will increase by 15% during the course of the 2012-2016 State Plan.

(Baseline data is the 2011 National Core Indicators - Washington State Face to Face data number of 24.0% - Goal is to reach 28%).

#### Area(s) of Emphasis:

#### Strategies to be used in achieving this goal:

- |   |   |
|---|---|
| <input checked="" type="checkbox"/> Quality Assurance           | <input checked="" type="checkbox"/> Outreach  |
| <input type="checkbox"/> Education and Early Intervention       | <input checked="" type="checkbox"/> Training  |
| <input type="checkbox"/> Child Care                             | <input type="checkbox"/> Technical Assistance   |
| <input type="checkbox"/> Health                                 | <input type="checkbox"/> Supporting and Educating Communities                                   |
| <input type="checkbox"/> Employment                             | <input checked="" type="checkbox"/> Interagency Collaboration and Coordination                  |
| <input type="checkbox"/> Housing                                | <input checked="" type="checkbox"/> Coordination with related Councils, Committees and Programs |
| <input type="checkbox"/> Transportation                         | <input type="checkbox"/> Barrier Elimination  |
| <input type="checkbox"/> Recreation                             | <input checked="" type="checkbox"/> Systems Design and Redesign                                 |
| <input type="checkbox"/> Formal and Informal Community Supports | <input type="checkbox"/> Coalition Development and Citizen Participation                        |
|   | <input checked="" type="checkbox"/> Informing Policymakers                                      |
|   | <input checked="" type="checkbox"/> Demonstration of New Approaches to Services and Supports    |
|   | <input type="checkbox"/> Other Activities   |

#### Objectives

Objective 1.1: Increase the number of individuals with developmental disabilities who participate in self-advocacy, leadership, and self-determination activities.

#### Activities

Activity 1.1.1: Fund & support statewide self-advocacy organization.

Activity 1.1.2: Provide leadership opportunities for youth & adult self-advocates.

Activity 1.1.3: Promote training and mentoring of students in decision making and other self-advocacy skills. We will do this by (1) Collaborating with local & self-advocacy organizations on best practices for decision making. (2) Identifying most promising approaches; (3) Holding event; (5) Evaluating effect

Activity 1.1.4: Encourage people with developmental disabilities in the use of social media for advocacy. We will do this by (1) identifying social media currently used by people with developmental disabilities; (2) Work with members of the self-advocacy community to research ways social media can be used for self-advocacy and advocacy. (3) Identifying one or two methods to implement. (4) Implementing new method(s) that have been identified & (5) Assessing the impact and effectiveness of the adopted methods.

#### Timeline

##### Activity 1.1.1:

Yr 1: Develop RFP/Select contractor/ Implement Contract

Yr 2: Develop work statement; implement & monitor contract.

Yr 3 & 4: Monitor contract/evaluate effectiveness

Yr 5: Monitor contract/evaluate effectiveness

##### Activity 1.1.2:

Yr 1: Identify opportunities for leadership within existing DD projects, partnerships & collaborations/Develop staff processes.

Yr 2-5: Match SA w/opportunities

##### Activity 1.1.3 & 1.1.4:

Step numbers match yearly timeline for these activities.

---

#### Objectives

Objective 1.2: Increase the number of people with developmental disabilities who participate in and conduct cross-disability and cross-cultural events, meetings and conferences.

#### Activities

Activity 1.2.1: Provide infrastructure and support for people with developmental disabilities to plan, conduct, and participate in cross-disability, crosscultural events, meetings and/or conference.

#### Timeline

Yr 1: Council staff & self advocates participate in "Self-Advocacy Summit.". Begin identifying areas for collaborations in cross-disability events.

Yr 2: Identify event(s) for collaboration.

Yr 3: Participate in collaborative events.

Yr 4: Council staff, council members and self-advocates evaluate effectiveness of event. Plan for next steps.

Yr 5: Implement "next steps".

---

#### Objectives

Objective 1.3: Increase the number of people with developmental disabilities who access and participate in self-advocacy membership programs and activities.

#### Activities

Activity 1.3.1: Identify and support new self-advocacy models that will outreach to children, youth and adults with disabilities who have not yet participated in self-advocacy programs.

#### Timeline

Timeline 1.3.1:

Yr 1: Council staff & self-advocates (SA) participate in Self-Advocacy summit to explore future of self-advocacy

Yr 2: Further research/explore new methods to enable people with developmental disabilities to act on their own behalf.

Yr 3: Select 1-2 methods to implement.

Yr 4: Implement new methods(s).

Yr 5: Assess impact/effectiveness of new methods.

---

#### Objectives

Objective 1.4: Increase or improve policies that ensure people with developmental disabilities' right to speak for themselves.

#### Activities

Activity 1.4.1: Collaborate with other agencies and advocate to improve programs or policies that promote alternatives to guardianship that are appropriate to the individual.

#### Timeline

Yr 1: Working with agencies, DDC Act partners and advocates, identify program or policies that unnecessarily restrict people with developmental disabilities' ability to speak for themselves.

Yr 2: Select two programs/policies to target for change activities.

Yr. 3: Implement change activity (activities).

Yr. 4: Monitor progress.

Yr 5: Evaluate progress (systems change) as a result of efforts.

---

#### Objectives

Objective 1.5: Increase the number of people with developmental disabilities who attain membership and hold positions of leadership in public and private organizations and on governing boards.

## Activities

Activity 1.5.1: Council staff work to identify opportunities and assist self advocates in attaining membership or in holding positions of leadership in public and private organizations and on governing boards.

## Timeline

Yr 1: Identify opportunities for leadership within existing DD projects, partnerships and collaborations. Develop internal infrastructure to monitor leadership opportunities and match with appropriate candidates.

Yr 2 & 3: Match self-advocates with leadership opportunities/monitor success/evaluate.

Yr 4: Match self-advocates with leadership opportunities/monitor success/evaluate/ Route to Success model/revise as necessary.

Yr 5: Match self-advocates with leadership opportunities.

---

Intermediaries/Collaborators Planned for this goal (if known):

- ☒ State Protection and Advocacy System
- ☒ University Center(s)
- ☐ State DD Agency

## GOAL # 2: Advocacy

Working collaboratively with others, the DD Council will increase by 500 the number of people informed about systems advocacy during the 2012-2016 State Plan period.

### Area(s) of Emphasis:

### Strategies to be used in achieving this goal:

- |   |   |
|---|---|
| <input checked="" type="checkbox"/> Quality Assurance           | <input type="checkbox"/> Outreach   |
| <input type="checkbox"/> Education and Early Intervention       | <input checked="" type="checkbox"/> Training  |
| <input type="checkbox"/> Child Care                             | <input type="checkbox"/> Technical Assistance   |
| <input type="checkbox"/> Health                                 | <input type="checkbox"/> Supporting and Educating Communities                                   |
| <input type="checkbox"/> Employment                             | <input checked="" type="checkbox"/> Interagency Collaboration and Coordination                  |
| <input type="checkbox"/> Housing                                | <input checked="" type="checkbox"/> Coordination with related Councils, Committees and Programs |
| <input type="checkbox"/> Transportation                         | <input type="checkbox"/> Barrier Elimination  |
| <input type="checkbox"/> Recreation                             | <input type="checkbox"/> Systems Design and Redesign  |
| <input type="checkbox"/> Formal and Informal Community Supports | <input checked="" type="checkbox"/> Coalition Development and Citizen Participation             |
|   | <input checked="" type="checkbox"/> Informing Policymakers                                      |
|   | <input checked="" type="checkbox"/> Demonstration of New Approaches to Services and Supports    |
|   | <input type="checkbox"/> Other Activities   |

### Objectives

Objective 2.1: Increase participation of people in systems advocacy.

### Activities

Activity 2.1.1: Provide advocacy information and training to people with developmental disabilities, their families and other community members.

Activity 2.1.2: Explore new advocacy models.

### Timeline

Activity 2.1.1:

Yr 1: Develop RFP/Select Contractor/ Implement Contract

Yr 2: Develop work statement;/Monitor contract implementation.

Yr 3: Monitor contract/evaluate effectiveness

Yr 4: Monitor contract/evaluate effectiveness (see evaluation plan)

Yr 5: Monitor contract/evaluate effectiveness

Activity 2.1.2:

Yr 1: Research advocacy models

Yr 2: Identify most promising models  
Yr 3: Research promising models  
Yr 4: Identify & further research 2 promising models  
Yr 5: Use in 2017 plan

---

#### Objectives

Objective 2.2: Increase DD Council collaboration with other developmental disability groups to work toward consensus within the developmental disabilities community.

#### Activities

Activity 2.2.1: Increase outreach to other developmental disability groups.

#### Timeline

Year 1: Explore current milieu, identify groups, convene & collaborate, assess effectiveness.  
Year 2: Explore current milieu, identify groups, convene & collaborate, assess effectiveness.  
Year 3: Explore current milieu, identify groups, convene & collaborate, assess effectiveness.  
Year 4: Explore current milieu, identify groups, convene & collaborate, assess effectiveness.  
Year 5: Explore current milieu, identify groups, convene & collaborate, assess effectiveness.

---

#### Objectives

Objective 2.3: Increase collaboration with other communities of interest.

#### Activities

Activity/Strategy 2.3.1: Initiate outreach to other groups and organizations.

#### Timeline

Year 1: Explore current milieu, identify groups, convene & collaborate, assess effectiveness.  
Year 2: Explore current milieu, identify groups, convene & collaborate, assess effectiveness.  
Year 3: Explore current milieu, identify groups, convene & collaborate, assess effectiveness.  
Year 4: Explore current milieu, identify groups, convene & collaborate, assess effectiveness.  
Year 5: Explore current milieu, identify groups, convene & collaborate, assess effectiveness.

---

#### Objectives

Objective 2.4: Increase elected officials' knowledge and action on developmental disability issues, needs and preferences.

#### Activities



Activity 2.4.1: Educate policy makers on developmental disabilities issues and the needs of people with developmental disabilities and their families.

Activity 2.4.2: Create and implement a public policy agenda for systems change.

#### Timeline

Activity 2.4.1:

Yr 1: Develop RFP/ Select contractor/ Implement Contract

Yr 2: Develop work statement; implement contract; monitor contract implementation.

Yr 3: Monitor contract/evaluate effectiveness

Yr 4: Monitor contract/evaluate effectiveness/ (Route to Success Matrix & discussion)

Yr 5: Monitor contract/evaluate effectiveness

Activity 2.4.2:

Each year of State Plan: Research & identify issues;collaborate with stakeholders; Council reviews, revises & approves. Assess effectiveness.

---

#### Objectives

Objective 2.5: Increase public knowledge about the Council and knowledge and action on developmental disabilities issues, needs and preferences.

#### Activities

Activity 2.5.1: Educate policy makers about the Council and its work to address issues impacting people with developmental disabilities and their families.

Activity 2.5.2: Educate the public about the Council and its work to address issues impacting people with developmental disabilities and their families.

#### Timeline

Activity 2.5.1:

Each year of the State Plan:

Identify "public information gaps" about the Council's role and work; identify communication methods and strategies; implement; assess effectiveness.

Activity 2.5.2:

Each Yearof the Plan:

Identify "information gaps" in the general public about DD issues & the needs & preferences of people with DD & their families; collaborate with stakeholders; Council reviews, revises & provides feedback; implement; assess affectivess.

---

Intermediaries/Collaborators Planned for this goal (if known):

- ☐ State Protection and Advocacy System
- ☐ University Center(s)
- ☐ State DD Agency

### GOAL # 3: Leadership

Each year of the 2012-2016 State Plan the DD Council, in partnership with local organizations, will provide leadership training to 40 new people with developmental disabilities or their family members.

#### Area(s) of Emphasis:

#### Strategies to be used in achieving this goal:

- |   |  |
|---|--|
| <input checked="" type="checkbox"/> Quality Assurance           | <input type="checkbox"/> Outreach  |
| <input type="checkbox"/> Education and Early Intervention       | <input checked="" type="checkbox"/> Training   |
| <input type="checkbox"/> Child Care                             | <input type="checkbox"/> Technical Assistance  |
| <input type="checkbox"/> Health                                 | <input type="checkbox"/> Supporting and Educating Communities                        |
| <input type="checkbox"/> Employment                             | <input type="checkbox"/> Interagency Collaboration and Coordination                  |
| <input type="checkbox"/> Housing                                | <input type="checkbox"/> Coordination with related Councils, Committees and Programs |
| <input type="checkbox"/> Transportation                         | <input checked="" type="checkbox"/> Barrier Elimination                              |
| <input type="checkbox"/> Recreation                             | <input type="checkbox"/> Systems Design and Redesign                                 |
| <input type="checkbox"/> Formal and Informal Community Supports | <input checked="" type="checkbox"/> Coalition Development and Citizen Participation  |
|   | <input checked="" type="checkbox"/> Informing Policymakers                           |
|   | <input type="checkbox"/> Demonstration of New Approaches to Services and Supports    |
|   | <input type="checkbox"/> Other Activities  |

#### Objectives

Objective 3.1: Increase the number of individuals who receive leadership training and have opportunities for leadership.

#### Activities

Activity 3.1.1: Identify, recruit, and provide leadership training for individuals with developmental disabilities, their families members and community members interested in becoming leaders.

Activity 3.1.2: Publicize examples of local leadership.

#### Timeline

##### 3.1.1:

Each year of the State Plan: Develop RFP/Select contractor/Develop work statement/Implement Contract/Assess effectiveness.

##### 3.1.2:

Each year of the State Plan: Identify potential local leadership participants to profile. Select participant to profile. Write story. Disseminate to other projects and public. Assess for impact and effectiveness.

Intermediaries/Collaborators Planned for this goal (if known):

- ☐ State Protection and Advocacy System
- ☐ University Center(s)
- ☐ State DD Agency

## GOAL # 4: Community Supports

By the end of the 2012-2016 State Plan, the percentage of people with developmental disabilities reporting that they are participating in community activities will increase by 10%.

(Use Washington's 2009 Child Family Survey (2010 data), Adult Family Survey and Family Guardian Survey (2011 data) averaged score of 68% for baseline. Goal would be 75% (combined) by end of 2012-2016 State plan)

### Area(s) of Emphasis:

### Strategies to be used in achieving this goal:

- |  |   |
|--|---|
| <input type="checkbox"/> Quality Assurance                                 | <input type="checkbox"/> Outreach   |
| <input type="checkbox"/> Education and Early Intervention                  | <input type="checkbox"/> Training   |
| <input type="checkbox"/> Child Care  | <input type="checkbox"/> Technical Assistance   |
| <input type="checkbox"/> Health  | <input checked="" type="checkbox"/> Supporting and Educating Communities                        |
| <input type="checkbox"/> Employment  | <input checked="" type="checkbox"/> Interagency Collaboration and Coordination                  |
| <input type="checkbox"/> Housing   | <input checked="" type="checkbox"/> Coordination with related Councils, Committees and Programs |
| <input type="checkbox"/> Transportation                                    | <input checked="" type="checkbox"/> Barrier Elimination   |
| <input type="checkbox"/> Recreation  | <input checked="" type="checkbox"/> Systems Design and Redesign                                 |
| <input checked="" type="checkbox"/> Formal and Informal Community Supports | <input checked="" type="checkbox"/> Coalition Development and Citizen Participation             |
|  | <input type="checkbox"/> Informing Policymakers   |
|  | <input checked="" type="checkbox"/> Demonstration of New Approaches to Services and Supports    |
|  | <input type="checkbox"/> Other Activities   |

### Objectives

Objective 4.1: Increase the number of families and individuals with developmental disabilities who report they know about paid services, community resources, and activities.

### Activities

Activity 4.1.1: Continue to provide necessary resources to maintain and update information provided through the Informing Families Building Trust Project.

Activity 4.1.2: Advocate for expansion of parent support programs (such as Parent to Parent).

### Timeline

Activity 4.1.1:

Each year:

(1) Collaborate with stakeholders and advisory committee to identify topics/issues to address on

IFBT project. (2) Develop & distribute information on identified topics. (3) Convene advisory committee. Assess project effectiveness;(4) identify next year's priorities.

#### Activity 4.1.2:

Each year:

(1) Monitor legislative activity around parent support funding. (2) Collaboratively advocate for continued support (3) Assess effectiveness.

---

### Objectives

Objective 4.2: Facilitate inclusion of individuals with developmental disabilities and their families through community connections .

### Activities

Activity 4.2.1: Support local community efforts to build personal and community connections.

### Timeline

Yr. 1: Council members & staff identify most promising approaches to developing community connections.

Yr.2: Identify most promising approaches/Develop RFP for project(s) based on findings.Award funding.

Yr. 3:Monitor selected contracts. Evaluate effectiveness. Fund current or new projects based on results.

Yr. 4: Monitor project(s) contracts. Fund current or new projects based on results. Evaluate effectiveness/ Route to Success Matrix & Discussion.

Yr. 5: Monitor contract/evaluate.

---

### Objectives

Objective 4.3: Increase the number of people with developmental disabilities and their families that plan and act on opportunities to become more economically self-sufficient .

### Activities

Activity 4.3.1: Conduct outreach and education activities to educate people with developmental disabilities about the DD Life Opportunities Trust.

Activity 4.3.2: Advocate for existing and new ways people with developmental disabilities can become more economically self-sufficient by building personal assets.

### Timeline

Activity 4.3.1:

For each yr of plan:

Identify opportunities/events to educate individuals and families about DDLOT. Participate in events. Assess effectiveness.

Activity 4.3.2:

Yr 1: Identify current asset building communities in WA State. Identify most effective approaches suited to persons with DD.

Yr 2: Further investigate most promising approaches. Identify Council's effectiveness in using these approaches.

Yr 3: Select approach(es). Take action.

Yr 4 & 5: Assess & continue.

---

## Objectives

Objective 4.4: People with developmental disabilities and their families have more control over the services they receive.

## Activities

Activity 4.4.1: Monitor and support policies that promote self-directed services, create individual budgets, or increase the individuals choice and control.

Activity 4.4.2: Convene stakeholder panels to review and make recommendations regarding Washington State's results of the National Core Indicators (NCI) Survey.

## Timeline

Activities 4.4.1:

Each year of the state plan: Monitor legislative activity around identified activity areas; collaboratively advocate for support (or continued support); assess effectiveness.

Activity 4.4.2:

Each year: Convene stakeholder panels to make recommendations on WA results on NCI survey  
Share results with the DD Council and the Division of Developmental Disabilities; monitor implementation of panel's recommendations.

---

## Objectives

Objective 4.5: Ensure services received by people with developmental disabilities are provided safely, enabling them to live lives free from abuse, neglect and financial exploitation.

## Activities

Activity 4.5.1: Review and monitor plans of corrections for Center for Medicare and Medicaid Services ICF/ID surveys and reports from the Division of Developmental Disabilities (DDD) on supported living.

Activity 4.5.2: Advocate for policies to prevent, identify and respond to abuse, neglect and financial

exploitation.

#### Timeline

##### Activity 4.5.1:

Each yr of state plan: Review plans of corrections & reports from DDD. Act on identified issues of concern. Monitor action taken on concerns.

##### Activity 4.5.2:

Each yr of state plan: Identify or work to develop policies that keep people with DD safe. Advocate for these policies. Assess advocacy effectiveness.

---

#### Objectives

Objective 4.6: Increase knowledge of and access to assistive technology through collaboration and advocacy.

#### Activities

Activity 4.6.1: Collaborate with organizations that educate people about the use of technologies and assistive devices for use at home, work and in the community.

Activity 4.6.2: Advocate for policies that assist people to access or purchase technology and assistive devices.

#### Timeline

##### Activity 4.6.1:

Yr. 1: Identify organizations that educate people about the use of assistive technologies and opportunities for collaboration.

Yr. 2-5: Begin collaborative work with organizations, bringing DD community needs and concerns to the work. Assess effectiveness

##### Activity 4.6.2:

In each year of the state plan: Identify or work to develop policies that assist people to access or purchase technology and assistive devices. Advocate for these policies. Assess advocacy effectiveness.

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#### Objectives

Objective 4.7: Ensure that Aging and Disability Resource Centers are responsive to people with developmental disabilities and their families.

#### Activities

Activity 4.7.1: Council staff and/or Council members participate on ADRC planning committee, ensure that people with developmental disabilities and their families are included in any ADRC



marketing and publicity efforts.

#### Timeline

Yrs 1-5 of State Plan:

Participate in state ADRC planning and development, ensuring that the needs of people with DD and their families are included in development, planning and marketing efforts of the ADRC implementation.

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#### Objectives

Objective 4.8: Facilitate bridge building between the aging, developmental disabilities and long-term care service networks.

#### Activities

Activity 4.8.1: Collaborate with senior organizations to educate people about the issues impacting people with DD who are aging and represent the issues faced by people with developmental disabilities and their families as a member of the Lifespan Crisis and Respite Care Coalition.

#### Timeline

4.8.1 Timeline:

Yr 1: As a member of the Lifespan Crisis and Respite Care Coalition, collaborate & advocate for the needs of people with DD who are aging; assess effectiveness.

Yrs 2-3: Continue to collaborate and advocate for the needs of people with DD who are aging; assess effectiveness.

Y. 4: Continue to collaborate and advocate for the needs of people with DD who are aging; assess effectiveness. Assess Systemic change (Route to Success)

Yr 5: Continue collaboration (if effective).

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Intermediaries/Collaborators Planned for this goal (if known):

- ☒ State Protection and Advocacy System
- ☒ University Center(s)
- ☐ State DD Agency

## GOAL # 5: Employment

During the course of the 2012-2016, the number of people with developmental disabilities reporting choice and control of their work place will increase by 10%

(Baseline- Washington State's Core Indicators Face to Face survey results (2011) . Number of respondents reporting that they chose without help or had some input where they worked - was 87% - 2016 goal would be 95% chose or had some input)

### Area(s) of Emphasis:

### Strategies to be used in achieving this goal:

- |   |  |
|---|--|
| <input type="checkbox"/> Quality Assurance                      | <input type="checkbox"/> Outreach  |
| <input type="checkbox"/> Education and Early Intervention       | <input type="checkbox"/> Training  |
| <input type="checkbox"/> Child Care                             | <input type="checkbox"/> Technical Assistance  |
| <input type="checkbox"/> Health                                 | <input checked="" type="checkbox"/> Supporting and Educating Communities                     |
| <input checked="" type="checkbox"/> Employment                  | <input checked="" type="checkbox"/> Interagency Collaboration and Coordination               |
| <input type="checkbox"/> Housing                                | <input type="checkbox"/> Coordination with related Councils, Committees and Programs         |
| <input type="checkbox"/> Transportation                         | <input checked="" type="checkbox"/> Barrier Elimination                                      |
| <input type="checkbox"/> Recreation                             | <input checked="" type="checkbox"/> Systems Design and Redesign                              |
| <input type="checkbox"/> Formal and Informal Community Supports | <input type="checkbox"/> Coalition Development and Citizen Participation                     |
|   | <input checked="" type="checkbox"/> Informing Policymakers                                   |
|   | <input checked="" type="checkbox"/> Demonstration of New Approaches to Services and Supports |
|   | <input type="checkbox"/> Other Activities  |

### Objectives

Objective 5.1: Increase the number of people with developmental disabilities able to acquire, attain and advance in paid employment in integrated settings.

### Activities

Activity 5.1.1: Advocate and collaborate to increase availability of benefit planners so all students exiting high school transition programs understand how work incentives will impact their employment plans.

Activity 5.1.2: : Explore, create and support new employment models, using the principles such as the Family-Led Employment approach.

Activity 5.1.3: Promote and advocate for employment funding, focusing on transition age students.

Activity 5.1.4: Support efforts to disseminate information about self-employment

## Timeline

### 5.1.1 & 5.1.4:

Yr 1: Explore current milieu regarding employment activity area. Yr 2: Identify strategies ; Yr 3: Implement identified strategies; Assess effectiveness Yr 4 & 5: Continue implementation.

### 5.1.2:

Yr 1: Research new employment models (EM) . Yr. 2: Identify new EM with most potential. Yr 3 & 4: Research two most promising EM. Yr 5: Use in 2017 plan

### 5.1.3:

All SP Years: Monitor legislative funding for employment; collaboratively advocate for continued support; assess effectiveness

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## Objectives

Objective 5.2: Increase post-secondary options that lead to employment.

## Activities

Activity 5.2.1: Identify and advocate for create post-secondary education opportunities.

## Timeline

### Activity 5.2.1:

Yr 1: identify programs currently working to help people with DD in WA State become self-employed or access vocational, secondary education and/or apprenticeship programs.

Yr 2: Develop strategies to increase visibility & outreach of programs.

Yr 3: Implement identified strategies. Evaluate effectiveness. Identify needed policy or program changes.

Yr 4: Continue (or implement) new strategies. Assess effectiveness.

Yr 5: Continue with &/or advocacy efforts.

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## Intermediaries/Collaborators Planned for this goal (if known):

- ☐ State Protection and Advocacy System
- ☐ University Center(s)
- ☐ State DD Agency

## GOAL # 6: Housing

As a result of DD Council efforts and collaborations, the number of people with developmental disabilities who report that they chose the place where they live will increase by 15% over the course of the 2012-2016 State plan.

(Uses Core Indicators Face to Face Survey question of- "who chose the place where you live?" - In 2011, 52% of self-advocates report they chose or had input into where they live. A 15% increase would be an increase 60% for the end of the 2012-2016 State Plan)

### Area(s) of Emphasis:

### Strategies to be used in achieving this goal:

- |   |  |
|---|--|
| <input type="checkbox"/> Quality Assurance                      | <input type="checkbox"/> Outreach  |
| <input type="checkbox"/> Education and Early Intervention       | <input type="checkbox"/> Training  |
| <input type="checkbox"/> Child Care                             | <input type="checkbox"/> Technical Assistance  |
| <input type="checkbox"/> Health                                 | <input checked="" type="checkbox"/> Supporting and Educating Communities                     |
| <input type="checkbox"/> Employment                             | <input checked="" type="checkbox"/> Interagency Collaboration and Coordination               |
| <input checked="" type="checkbox"/> Housing                     | <input type="checkbox"/> Coordination with related Councils, Committees and Programs         |
| <input type="checkbox"/> Transportation                         | <input checked="" type="checkbox"/> Barrier Elimination                                      |
| <input type="checkbox"/> Recreation                             | <input checked="" type="checkbox"/> Systems Design and Redesign                              |
| <input type="checkbox"/> Formal and Informal Community Supports | <input type="checkbox"/> Coalition Development and Citizen Participation                     |
|   | <input checked="" type="checkbox"/> Informing Policymakers                                   |
|   | <input checked="" type="checkbox"/> Demonstration of New Approaches to Services and Supports |
|   | <input type="checkbox"/> Other Activities  |

### Objectives

Objective 6.1: Increase the inventory of safe, affordable and accessible housing.

### Activities

Activity 6.1.1: Continue to advocate for DD housing set-aside.

Activity 6.1.2: Promote opportunities for people with developmental disabilities to become homeowners.

### Timeline

Activity 6.1.1:

Each Yr of State Plan: Monitor legislative activity in regard to DD Housing Set Aside funding; collaboratively advocate for continued support; assess effectiveness.

#### Activity 6.1.2:

Yr 1: Identify programs currently providing homeownership opportunities for people with DD in WA State. Initiate (or continue) contact

Yr 2: Develop strategies to increase visibility & outreach of programs.

Yr 3 & 4: Implement identified strategies. Evaluate effectiveness.

Yr 5: Continue.

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### Objectives

Objective 6.2: Increase housing options for people with developmental disabilities living in the community.

### Activities

Activity 6.2.1: Support local community efforts to provide housing choices for people with developmental disabilities. Step 1: Develop outreach plan to connect local communities around housing choices. Advocate for policies that will provide housing choice for people with DD. Step 2: Contact & collaborate with interested local communities on potential ways to increase choice. Advocate for policies that will provide housing choice for people with DD. Step 3: Explore "inclusive community strategies" which can be used/adapted to develop housing. Step 4: Assess effectiveness of community efforts. Develop housing "best practices" resource for dissemination; advocate for policies that support change.

Activity 6.2.2: Include housing for people with developmental disabilities in local area comprehensive plans.

Activity 6.2.3: Ensure alternative living situations are available in the community for those moving from institutional to community settings.

### Timeline

#### Activity 6.2.1:

Yr 1- Complete Step 1. Yr 2 & 3- Complete Step 2. Yr 4- Complete Step 3. Yr 5- Complete Step 4.

#### Activity 6.2.2:

Yr 1. Develop "how to" guide/resource on local comprehensive plans (CP).

Yr 2: Provide training to Council members (CM) -Identify CP planning dates in CMs' areas.

Yr 3 -5: Participate in CP planning processes

#### Activity 6.2.3:

Yr 1-2: Work w/DDD to ensure people in institutions have residential options meeting their needs. Evaluate success. Modify as needed.

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Intermediaries/Collaborators Planned for this goal (if known):

- ☐ State Protection and Advocacy System
- ☐ University Center(s)
- ☒ State DD Agency

Department of Commerce

## Section V : Evaluation Plan [Section 125(c)(3) and (7)]

- Outline how the Council will examine the progress made in achieving the goals of the State Plan.
- Explain the methodology, which may be qualitative or quantitative, that will be used to determine if the needs identified and discussed are being met and if the Council results are being achieved.
- Describe the Council's role in reviewing and commenting on progress towards reaching the goals of the Plan.
- Describe how the annual review will identify emerging trends and needs as a means for updating the Comprehensive Review and Analysis.

The Council, its workgroups and committees and Council staff will monitor and evaluate progress in achieving goals in a number of ways.

### Staff/Internal Measurement

As Washington continues its implementation of DD Suite, goals and objectives will be tracked through the DD program and Council staff will be able to easily get information needed on project progress and staff activities. Activities a

### Workgroups

Workgroups will be assigned oversight of specific state plan goals and objectives. Using DD Suite as a tracking (and measuring) tool, workgroups will assess progress in achieving goals and objectives.

### The Council

Twice a year the Council as a whole will review activities in its state plan and whether these activities are working toward the goals in the state plan

In addition to using DD Suite, which will be invaluable as a quantitative measure of whether the Council is achieving its goals, the Council will also work to assure that the quality of its funded projects is high by requiring contracted projects to survey participants about the effectiveness of the project activities. These evaluations will be also reviewed as the Council determines if contracted projects are working successfully to meet the Council's objectives.

### Big Picture Work Plan

As previously described, the activities required to meet the goals of the 2012-2016 state plan will be monitored by the workgroups and committees using the "Big Picture Work Plan," that has been working as a monitoring tool during the last state plan. This tracking document charts the monthly progress of the milestones and activities of the Council's activities, contracts and projects.

An annual review process will be an opportunity for the Council to review and evaluate not only the status on meeting the goals of the state plan, but to have discussion about emerging trends and issues which may require changes in the Council's plan. First workgroups, and then the full Council, will address any needed changes and staff will ensure that feedback is captured and utilized to update the Comprehensive Review and Analysis.

### Route to Success

In addition the methods described above, the Council (and its workgroup and activities) will use the Route to Success model to identify additional areas that may be addressed in order to meet state plan goals. A major review will occur near the end of the third year of the state plan. Using the Route to Success framework at

this specific time serves two purposes: Identifies potential windows of opportunity for change in the current state plan goal areas and information that will be useful to carry forward in developing the 2017-2022 state plan.

**ATTACHMENTS:**

DD Council 2013 Assurance\_Signed.pdf

Council Assurances Signed by New Council Chair

Strategy\_Activity\_Crosswalk\_120807.pdf

Crosswalk of 2012 & 2013 Activity - Strategy Changes

2012 vs 2013 State Plan Goals.pdf

2012 versus 2013 State Plan Goals - Washington State

WA 2013 State Plan amendment update checklist.pdf

Washington State Plan Amendment Update Checklist



**Section VI : Projected Council Budget [Section 124(c)(5)(B) and 125(c)(8)]**

Goal	Subtitle B \$	Non-Federal Share \$	Total \$
1. Advocacy	317,702	25,000	342,702
2. Community Supports	243,702	324,608	568,310
3. Employment	27,284	0	27,284
4. Housing	27,284	0	27,284
5. Leadership	104,567	16,666	121,233
6. Self-Advocacy	184,135	50,000	234,135
7. General Management	299,250	0	299,250
8. Functions of the DSA	50,000	57,000	107,000
9. TOTALS	1,253,924	473,274	1,727,198

## Section VII : Assurances [Section 124(c)(5)(A)-(N)]

Written and signed assurances must be submitted to the Administration on Developmental Disabilities, Administration for Children and Families, United States Department of Health and Human Services, regarding compliance with all requirements specified in Section 124 (C)(5)(A) and (N) in the Developmental Disabilities Assurance and Bill of Rights Act.

☒ Assurances submitted

### Approving Officials for Assurances

☒ For the Council (Chairperson)

☒ For DSA, when not Council

## **Section VIII : Public Input and Review [Section 124(d)(1)]**

**PART A:** How the Council made the plan available for public review and comment and how the Council provided appropriate and sufficient notice in accessible formats of the opportunity for review and comment.

**A draft of the Washington DD Council's 2012-2016 State Plan goals, objectives and performance targets was posted on the Council's website and distributed to the Council's interested parties list (1,126 individuals and organizations) in January 2011. The Council also encouraged other organizations to let their members know about the public comment period and how to provide public comment. The time allocated for open comment exceeded the 45 day comment period. During this time 600 individuals visited the "What's New" page (where the plan was posted) and ten individuals provided written or oral comment about the state plan.**

**PART B:** Revisions made to the Plan after taking into account and responding to significant comments.

**All public comments were reviewed by the Council members during their May 2011 Council meeting. Comments were received in a number of different areas, but none were significant enough to warrant Plan revision, although public comments will be considered in taking future action identified areas. The Council chose to move forward with their proposed goals, objectives and strategies as written.**